Article - Health - General

[Previous][Next]

§19-342.

- (a) In this section, "patient" includes an inpatient, an outpatient, and an emergency services patient.
- (b) The General Assembly intends to promote the health, safety, and well—being of patients and to foster better communication between patients and health care providers in hospitals through the use of a patient's bill of rights that specifies the ethical and humane treatment the patient has a right to expect.
 - (c) Each administrator of a hospital shall:
- (1) Provide to each patient in the hospital a written copy of the patient's bill of rights that:
- (i) The hospital adopts under Joint Commission guidelines or guidelines issued by a nationally recognized hospital accreditation organization approved by the Centers for Medicare and Medicaid Services conditions of participation; and
 - (ii) Complies with subsection (d) of this section;
- (2) If a patient does not speak English or requires the patient's bill of rights in an alternative format, provide a translator, an interpreter, or another accommodation to assist the patient in understanding and exercising the rights included in the patient's bill of rights;
- (3) Conspicuously post copies of the patient's bill of rights on the hospital's website and in areas that are accessible to patients and visitors, which may include admitting offices, patient floors, patient rooms, the outpatient department, and emergency services waiting areas; and
- (4) Provide annual training to all patient care staff members to ensure the staff's knowledge and understanding of the patient's bill of rights.
- (d) The patient's bill of rights shall at a minimum include a statement, in plain language, that a patient has a right to:
 - (1) Receive considerate, respectful, and compassionate care;

- (2) Be provided care in a safe environment free from all forms of abuse and neglect, including verbal, mental, physical, and sexual abuse;
- (3) Have a medical screening exam and be provided stabilizing treatment for emergency medical conditions and labor;
 - (4) Be free from restraints and seclusion unless needed for safety;
- (5) Be told the names and jobs of the health care team members involved in the patient's care if staff safety is not a concern;
- (6) Have respect shown for the patient's personal values, beliefs, and wishes;
- (7) Be treated without discrimination based on race, color, national origin, ethnicity, age, gender, sexual orientation, gender identity or expression, physical or mental disability, religion, language, or ability to pay;
- (8) Be provided a list of protective and advocacy services when needed:
- (9) Receive information about the patient's hospital and physician charges and ask for an estimate of hospital charges before care is provided and as long as patient care is not impeded;
- (10) Receive information in a manner that is understandable by the patient, which may include:
 - (i) Sign and foreign language interpreters;
- (ii) Alternative formats, including large print, braille, audio recordings, and computer files; and
- (iii) Vision, speech, hearing, and other temporary aids as needed, without charge;
- (11) Receive information from the patient's doctor or other health care practitioners about the patient's diagnosis, prognosis, test results, possible outcomes of care, and unanticipated outcomes of care;
- (12) Access the patient's medical records in accordance with HIPAA Notice of Privacy Practices;
 - (13) Be involved in the patient's plan of care;

- (14) Be screened, assessed, and treated for pain;
- (15) Refuse care;
- (16) In accordance with hospital visitation policies, have an individual of the patient's choice remain with the patient for emotional support during the patient's hospital stay, choose the individuals who may visit the patient, and change the patient's mind about the individuals who may visit;
- (17) Appoint an individual of the patient's choice to make health care decisions for the patient, if the patient is unable to do so;
 - (18) Make or change an advance directive;
- (19) Give informed consent before any nonemergency care is provided, including the benefits and risks of the care, alternatives to the care, and the benefits and risks of the alternatives to the care;
- (20) Agree or refuse to take part in medical research studies, without the agreement or refusal affecting the patient's care;
- (21) Allow or refuse to allow pictures of the patient for purposes other than the patient's care;
- (22) Expect privacy and confidentiality in care discussions and treatments;
- (23) Be provided a copy of the Health Insurance Portability and Accountability Act Notice of Privacy Practices; and
- (24) File a complaint about care and have the complaint reviewed without the complaint affecting the patient's care.
- (e) The Office of Health Care Quality shall monitor the compliance of each hospital with the requirements of this section.

[Previous][Next]